TRADEMARK TR	RANSMITTAL FORM  all correspondence after initial filir f Pages in This Submission 16	Art Unit  persons are required to respond to a control of the person of	Olection of initial of the olection of the ole	Trademark Office; U.S. DEF formation unless it displays 644,076	PTO/SB/21 (09-04) 07/31/2006. OMB 0651-0031 PARTMENT OF COMMERCE a valid OMB control number.		
		ENCLOSURES (Check a	il that appl	y)			
Amendm A A Extension Express Information Certified Documer Reply to Incomple	smittal Form  ee Attached  ent/Reply  fter Final  ffidavits/declaration(s)  n of Time Request  Abandonment Request  on Disclosure Statement  Copy of Priority  tt(s)  Missing Parts/ te Application eply to Missing Parts nder 37 CFR 1.52 or 1.53	Drawing(s)  Licensing-related Papers  Petition Petition to Convert to a Provisional Application Power of Attorney, Revocat Change of Correspondence Terminal Disclaimer Request for Refund CD, Number of CD(s)  Landscape Table on C  Remarks  Leturn Receipt Postcard and Assign	Address	Appeal Commof Appeals are Appeal Commof Appeal Commof (Appeal Notice Proprietary In Status Letter Other Enclose below):	ce Communication to TC nunication to Board nd Interferences nunication to TC a, Brief, Reply Brief) iformation ure(s) (please Identify		
	SIGNATU	JRE OF APPLICANT, ATT	ORNEY, (	OR AGENT			
Firm Name	MedicineLodge, Inc.						
Signature	11	7					
Printed name	Printed name David Meibos						
Date	6-5-06		Reg. No.	45,885			
	nat this correspondence is being as first class mail in an envel	RTIFICATE OF TRANSMISS  og facsimile transmitted to the USP ope addressed to: Commissioner to	TO or depor or Patents,	sited with the United Sta			

Typed or printed name

Kathleen Hansen

Date

JSJOC

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

	FEE TRANSMITTAL		Complete if Known							
	0 P E For EV 2006			Application Number 09/644,026						
/	(As of 01/01/2006) F			Filling Date			/22/2000			
				ed In	entor	L	ytton A. Williams			
<b>P</b>				Nam	e					
13	Applicate Claims small entity status.									
				Dock	et No.	1	0721-17			
	Method of Payment		Fee Calculation (Continued)							
			3. ADDITIONAL FEES							
	Check Credit Card Money Other None		Large Entity Small En			Entity Fee				
,	Order		Code 1051	(\$) 130	<u>Code</u> 2051		Fee Description Fee Paid Surcharge - late filing fee or oath.			
	Deposit Account:									
)	50-3352		1052	50	2052		Surcharge – late provisional filing fee or cover sheet.			
	30-3332		1053	130	1053	130	Non-English specification.			
	MedicineLodge, Inc.		1251	120	2251	60	Extension for reply within first month.			
	The Commissioner is authorized to: (Check all that apply)						• •			
	F		1252	450	2252	225	Extension for reply within second month.			
	Charge fee(s) indicated below			1,020 1,590	2253 2254	510 795	Extension for reply within third month.  Extension for reply within forth month.			
	Charge any additional fee(s) during the pendency of this application	n		2160	2255		Extension for reply within fifth month.			
	r		1401	500	2401	250	Notice of Appeal.			
	Charge fee(s) indicated below, except for the filing fee to the about identified deposit account.	ve-	1402	500 1,000	2402 2403	250 500	Filing a brief in support of an appeal.  Request for oral hearing.			
	FEE CALCULATION		1451	1,510	1451	1.510	Petition to institute a public use proceeding.			
	I.BASIC FILING FEE		1452	500	2452	250	Petition to revive - unavoidable.			
	Large Entity Small Entity  Code Fee(\$) Code Fee(\$) Fee Description Fee P	aid	1453	1.500	2453	750	Petition to revive - unintentional			
	1001 300 2001 150 Utility filing Fee		1501	1,400	2501	700	Utility Issue fee (or reissue)			
	1111 500 2111 250 Utility Search Fee 1311 200 2311 100 Utility Examination Fee		1502	800	2502	400	Design Issue Fee Plant Issue Fee			
	1081 250 2081 125 Utility Application Size Fee	<del></del>	1503	1,100	2503	550	riant issue ree			
	1002 200 2002 100 Design filing Fee		8021 40 8021 40 Recording each patent assignment per 360.00							
	1004 300 2004 150 Reissue filing fee			property (times number of properties)						
	1005 200 2005 100 Provisional filing fee 1085 250 2085 125 Prov. Size Fee for		1801	790	2801	395	Request for Continued Examination (RCE)			
	additional 50 sheets over 100		1802	900	1802	900	Request for expedited examination of			
	Subtotal(1) (\$)						a design application.			
	2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action.			
	Fee from Extra Claims below Fee Paid		1005	1 040	1006	1 040				
		****	1805	1.840	1805	1,840	Requesting publication of SIR after Examiner action.			
	Total Claims 2 -20**= x = 1	·····	1806	180	1806	180	Submission of information disclosure stmt.			
	Independent -3**= x =		1807 1809	50 790	1807 2809	50 395	Processing fee under 37 CFR 1.17(q). Filing a submission after final rejection			
	Claims		1007	770	2007	373	(37 CFR 1.129 (a)			
	Multiple Dependent =		1810	790	2810	395	For each additional invention to be examined (37 CFR 1.129(b)			
	Large Entity Small Entity  Code Fee(\$) Code Fee(\$) Fee Description Fee	paid	1812	2,520	1812	2,520	For filing a request for ex parte			
	1202 50 2202 25 Claims in excess of 20.	<u>paiu</u>					reexamination.			
	1201 200 2201 100 Independent claims in excess of 3.		1814	130	2814	65	Statutory Disclaimer			
	1203 360 2203 180 Multiple dependent claim,			Other Fee						
	if not paid.  1204 200 2204 100 **Reissue independent claims			Reduced by Basic Filing paid Subtotal (3) 360.00						
	over original patent.									
	1205 50 2205 25 **Reissue claims in excess of 20 and over original patent.									
	Subtotal(2) (\$)									
	SUBMITTED BY:									
	Name David W. Meibos Registr			). <b>4</b>	5,885		Telephone:435-753-7675			
	Signature				Date		6-5-06			
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